

Exhibit C

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Rehabilitation Consultation Report

November 16, 2014

TO: AUSA Joan Binkley
United States Attorney's Office
101 South Edgeworth Street, 4th Floor
Greensboro, North Carolina 27401

FROM: Julie Sawyer-Little

SUBJECT: Billy L. Boles, Jr.

The conclusions and recommendations in this report have been developed based on review of medical evidence available, consultation with Dr. Vincent Paul, and information obtained via deposition of Mr. Boles taken on October 28, 2014. The purpose of this evaluation was to assess his present functional status/abilities and vocational capacity.

Note: This report has been developed based on available information concerning Mr. Boles. If additional medical records or evidence is submitted after production of this report, it may necessitate an update or revision at that point.

IDENTIFYING and BACKGROUND INFORMATION

Name	Billy Lee Boles, Jr.
Date of Birth	1972 (42)
Residence	Lexington, North Carolina
Household	Resides with his wife Tammy Boles and their 18 year old daughter
Onset of Disability	1/9/11
Initial Treatment	Wake Forest Baptist University Medical Center

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EXHIBIT
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Employment at Onset of Disability	Not employed at the time of accident
Employment since Onset of Disability	Has not been employed since the accident

DISABLING PROBLEM

Previous Medical History

Mr. Boles denies any health related issues prior to the shooting. He reports that his health was good and denies any previous hospitalizations. When asked if he had any pre-incident medical treatment he reported "hardly any".

Chief Complaints

Mr. Boles complains of "limited use of the right upper extremity". He describes decreased sensation for hot and cold. Mr. Boles describes a "bee stinging" sensation with lack of sensation in the hand. Later in the deposition he reported no feeling in the right hand and "cannot use it that well". He continues to experience discomfort in his right arm and hip.

MEDICAL TREATMENT

Previous

Gina Snyder, MD
Lexington Primary Care

Current Provider

Gina Snyder, MD
Lexington Primary Care
Currently seen 1 time per month

Medication

Nexium and "medication for anxiety and depression". Denies taking any medication prior to the accident.

MEDICAL HISTORY-Attached to report

Functional Daily Activities/Physical Capacity –The following information was provided based on responses to deposition questions posed on 10/28/14. He reports being independent with activities of daily living. He does not do any cooking because he burnt himself a few times due to decreased sensation in the right hand/arm. He did receive physical therapy for a period of time but it was discontinued.

Mr. Boles reports being unable to maintain the yard and he has neighborhood boys who he currently pays to mow his yard. His wife continues to manage the cooking, cleaning, and laundry. Grocery shopping is done by either Mr. Boles or his daughter.

Mr. Boles describes a typical day as rising between 6-8 a.m. He may go out to eat breakfast with his father and socialize with friends. He will return home and watch movies. Occasionally he may go to Dollar Tree or Lowe's for groceries. His wife does not work outside the home and is currently home schooling their daughter. Mr. Boles will assist with printing homework and paperwork for his daughter. On occasion he will provide school instruction. He does assist with scheduling art and music class. In regard to household chores, he will "straighten the middle room" and his wife manages the remaining household duties.

Hobbies: Mr. Boles previously enjoyed bow and arrow hunting. He presently spends his time watching television, movies, sitting outside, and burning wood.

Consult with Dr. Paul: Evaluator had an opportunity to consult with Dr. Vincent Paul regarding his file review and opinions. Opinions and conclusions provided during the phone call are accurately reflected in his report submitted on 11/14/14.

Summary and Observations:

Mr. Boles was observed to position his right upper extremity in his lap. He was able to raise his right arm to approximately 90 degrees to receive the oath. He became emotional when discussing the impact of the incident on his wife and required a brief recess. Mr. Boles was unable to provide a complete work history and specifics regarding past surgical interventions or medical conditions due to reports of poor memory. Additionally he was not clear on whether he had ever received unemployment, workers compensation benefits or being injured on the job.

Psychological/Cognitive Limitations: Mr. Boles reports that his memory has changed since the incident. He relies on his father to remind him to pay bills. Additionally he indicates having difficulty "comprehending stuff". Overall his life has changed; he has difficulty with "going out, being paranoid and scared of everything." He relates to having difficulty with not being able to provide for his family both financially and emotionally. Instead he relies on his wife and daughter to ensure that he completes tasks. However, he apparently has not reported these problems to his treating physician nor has he been formally evaluated for a head injury. Additionally, he is not presently receiving counseling services through a psychologist or psychiatrist. However, Mr. Boles reports to receiving services since the accident but there are no records to confirm his treatment.

Educational/Vocational History

Mr. Boles is a 42 year old male who graduated from East Davidson High School in 1991. He attended Greensboro Technical Community College for a few years with an emphasis in criminal justice. He returned to Davidson Community College and completed 22-24 credits but no official degree was granted. He did obtain his Basic Law Enforcement Training Certificate in 2000. However the certification expired prior to obtaining work in the field. He does have a current North Carolina Driver's License with no restrictions and continues to drive on an intermittent basis. During the

deposition, Mr. Boles was a poor historian and had difficulty with detailing specifics regarding his past relevant work. He indicates that his last year of competitive employment was in 2009. During that year, he worked as a security guard for Wackenhut (Dell Computers Company). His duties involved watching the security monitors. He was employed as a sales clerk in the lawn and garden department at Lowes Home Improvement for approximately 1-1.5 years. His hourly rate as a sales clerk was 9.50. He worked for Kmart as a loss prevention specialist for approximately 4-5 years. He apparently worked as a satellite installer for American Digital before 2000 but was unable to remember any specifics about this job or if he was ever employed with this company. He worked as a life guard in high school and was unable to give any more details or specifics regarding other work history/experience. Mr. Boles was unable to recall if he has ever been fired or received disciplinary action in the past. Additionally, he was unable to remember any previous injuries or receiving workers compensation in the past. Based on the information obtained, his past relevant work is outlined below.

Job Title	DOT	Skill/Demand	General Educational
Security Guard	372.667-038	3-Semiskilled, Light	R-2, M-1, L-2
Surveillance System Monitor	379.367-010	2-Unskilled, Sedentary	R-3, M-1, L-3
Retail Sales Clerk	211.462-014	3-Semiskilled, Light	R-3, M-2, L-2
Loss Prevention	372.667-038	3-Semiskilled, Light	R-2, M-1, L-2

Vocational Analysis

Based on the limited information obtained, it appears that Mr. Boles' work experience included jobs in the unskilled and semi-skilled category. These occupations would not require any formal education and any training would occur on-the-job. All of these positions could be learned in less than 30-60 days. Additionally, these positions would not require individuals to lift greater than 10-20 lbs. on an occasional basis. Typically these positions require frequent reaching, handling, and fingering. However there would be positions that would accommodate less than frequent use of the right upper extremity.

Mr. Boles reports that he feels he is unable to work due to "decreased use of the right arm/hand, not knowing who to trust", and increased pain in the right hip with prolonged walking. He feels his hip pain would prevent him from performing the walking and stair climbing requirements of a security position. He admits to doing some job search (security jobs) since the incident via Craigslist, unemployment office, and other websites. He did apply for one position to work overseas as security but was told "he wouldn't get hired". Mr. Boles admits that he is presently receiving social security disability benefits and Medicaid. Recently, he qualified for Medicare benefits as well.

Present Vocational Status: At the present time it is difficult to determine his current functional limitations in regard to return to work. Based on review of medical evidence he had 3 prior workers' compensation claims relating to his right shoulder, low back and groin area. Apparently a functional capacity evaluation was completed in 2005 which showed inconsistent performance based on self-limiting behavior. This evaluator did not have an opportunity to review this report or any other examination which would provide objective data regarding his functional limitations. The only work related restrictions mentioned in the medical records were provided by Dr. Kenneth Lennon (High

Point Orthopaedic and Sports Medicine). At that time, Mr. Boles was restricted to: lifting up to 20 lbs. occasionally, occasional walking/standing and frequent sitting. Additionally he should perform no bending, squatting, climbing, pushing/pulling, crawling, and kneeling.

Summary and Recommendations

As previously stated, additional information is required in order to adequately render an opinion regarding his vocational capacity. Required information is indicated below. Upon receipt of these documents and further consultation with Dr. Vincent Paul, this evaluator will be in a better position to provide opinions regarding his functional limitations and ability to return to gainful employment.

- It is recommended that a Functional Capacity Evaluation be completed to assess current physical capacities. The evaluation needs to include validity testing to provide objective information regarding sincerity of effort.
- Request and obtain a complete copy of file from the Social Security Administration
- Obtain a complete copy of medical records from Gina Snyder, MD with Lexington Primary Care where he continues to receive treatment. Records should include past and present medical services (2004 to the present)
- Complete copy of any counseling or psychiatric treatment received
- Complete copy of physical therapy treatment received (from 2004 to the present)
- Copy of any prescriptions filled since the accident related to reports of anxiety

This concludes the narrative report on Billy L. Boles, Jr. I am happy to review additional evidence and modify the report accordingly if the need arises. Please feel free to contact my office if you have additional questions or require further clarification.

Respectfully submitted,



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ABVE-Fellow